



CITY OF DES MOINES
APPLICATION FOR APPOINTIVE OFFICE
21630 11th Avenue South
Des Moines, WA 98198

Recvd. _____

Please Check

NAME: _____
ADDRESS: _____
CITY, ZIP: _____
PHONE: Home _____ Work _____
LENGTH OF RESIDENCE AT THE ABOVE ADDRESS _____
REGISTERED VOTER? _____

- ☐ Civil Service Commission
- ☐ Planning Agency
- ☐ Library Board
- ☐ Human Services
- ☐ Senior Services
- ☐ Arts Commission
- ☐ Marina Beach Park Cmte.

EMPLOYMENT SUMMARY LAST FIVE YEARS: _____

Are you related to anyone presently employed by the City or a member of a City Board? _____
If yes, explain: _____

Do you currently have an owning interest in either real property (other than your primary residence or a business) in the Des Moines planning area? _____ if so, please describe: _____

IN ORDER FOR THE APPOINTING AUTHORITY TO FULLY EVALUATE YOUR QUALIFICATIONS FOR THIS POSITION, PLEASE ANSWER THE FOLLOWING QUESTIONS USING A SEPARATE PAPER IF NECESSARY.

1. Why do you wish to serve in this capacity and what can you contribute? _____

2. What problems, programs or improvements are you most interest in? _____

3. Please list any Des Moines elective/appointive offices you have run/applied for previously. _____

